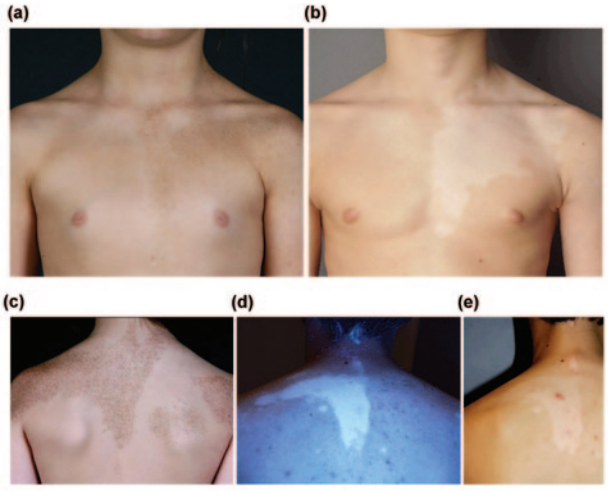
Distribution pattern of segmental vitiligo



Van Geel *et al.* performed a retrospective observational study comparing the distribution pattern of 724 unilateral, linear or band-shaped control lesions with 181 segmental vitiligo lesions. Clinical photographs were used to score similarities according to a defined grading system (scale ranging from 0 for no similarities to 4 for complete similarity). In general, only a minority of cases (36.9%), showed similarities between control lesions and segmental vitiligo. Grade 2–4 similarities were seen mainly in segmental lentiginosis (73.7%, $P < 0.001$). The remarkable clinical similarity with several cases of mosaic diseases involving melanocytes supports the hypothesis that cutaneous mosaicism may be involved in segmental vitiligo. *Br J Dermatol* 2013; 168: 56–64.

Itch-related visual stimuli and scratch response

Table 1 Means (± 1 SD) for 'self' and 'other' itch ratings measured on a numerical visual analogue scale of 0–10 (0, no itch; 10, very itchy) and scratch observations for both itch- and non-itch-related pictures separated by picture type ('skin contact', 'skin response' and 'context only')

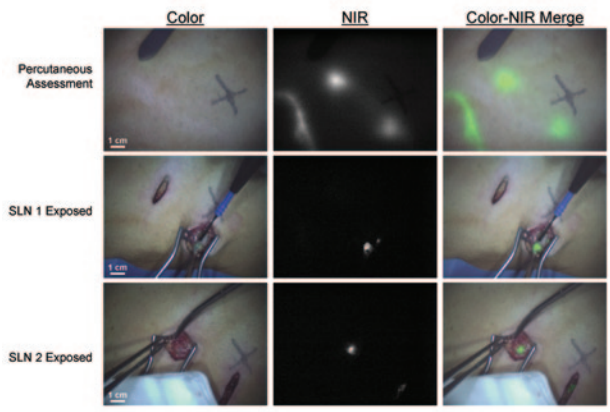
	Itch-related pictures			Non-itch-related pictures		
	Skin contact	Skin response	Context only	Skin contact	Skin response	Context only
'Self'	5·0 (2·4)	2·5 (2·0)	4·5 (1·9)	1·1 (1·1)	1·2 (1·1)	1·3 (1·2)
'Other'	7·0 (1·3)	5·1 (2·0)	—	1·4 (1·2)	1·6 (1·2)	—
Scratch observation[a]	1·1 (1·4)	2·0 (1·9)	0·4 (0·9)	0·2 (0·6)	0·1 (0·3)	0·0 (0·2)
Averaged over conditions						
	Itch	Non-itch	Skin contact	Skin response	Context only	
'Self'	4·0 (1·7)	1·2 (1·1)	3·0 (1·5)	1·9 (1·3)	2·9 (1·4)	
'Other'	6·1 (1·5)	1·5 (1·1)	4·2 (1·0)	3·4 (1·4)	—	
Scratch observation[a]	1·2 (1·3)	0·1 (0·3)	0·7 (0·9)	1·1 (1·0)	0·2 (0·5)	

[a]Measured as the number of scratch observations per picture type.

Lloyd *et al.* tested a series of static images for their effectiveness in generating self-reported feelings of itch and provoking a spontaneous scratch response in people with no existing pruritic skin condition. Participants were also asked to rate how itchy they believed the person in the picture was feeling, to establish whether 'self ' and 'other' itch ratings would correlate. The sensation of itch was successfully generated using itch-related pictures, with higher self-reports of itch in answer to the questions 'How itchy do you feel?' and 'How itchy do you think the person in the picture feels?', compared with viewing neutral pictures. Participants also scratched themselves more when viewing itch-related pictures than when viewing neutral ones. This study demonstrates the impact of visual cues in eliciting sensations of itch and provoking a scratch response, and may provide behavioural evidence linking contagious itch to the mirror neuron system. *Br J Dermatol* 2013; 168: 106–111.

Dose optimization for melanoma SLN mapping

Fifteen patients with cutaneous melanoma underwent standard sentinel lymph node (SLN) procedure using ^{99m}technetium-nancolloid and patent blue. In addition, intraoperative near-infrared (NIR) fluorescence imaging was performed after injection of 600, 800, 1000 or 1200 μmol L^{-1} of indocyanine green adsorbed to human serum albumin (ICG:HSA). NIR fluorescence SLN mapping was successful in 93% of patients. A total of 30 SLNs were detected, 30 radioactive, 27 blue and 30 NIR fluorescent. This study demonstrates the feasibility and accuracy of SLN mapping using ICG:HSA. Considering safety,



cost and pharmacological characteristics, an ICG:HAS concentration of 600 μmol L^{-1} appears optimal for SLN mapping in cutaneous melanoma, although lower doses need to be assessed. *Br J Dermatol* 2013; 168: 93–98.

Decreased skin cancer risk in patients with vitiligo

This retrospective, comparative cohort survey was designed to assess lifetime prevalences of melanoma and nonmelanoma skin cancer (NMSC) in patients with vitiligo compared with nonvitiligo controls. Adjusted for confounders, patients with vitiligo had a threefold lower probability of developing melanoma [adjusted odds ratio (OR) 0.32; 95% confidence interval (CI) 0.12–0.88] and NMSC (adjusted OR 0.28; 95% CI 0.16–0.50). Subgroup analyses of patients treated with narrowband ultraviolet (UV) B, and psoralen and UVA did not show dose-related trends of increased age-adjusted lifetime prevalence of melanoma or NMSC.

The results suggest that patients with vitiligo have a decreased risk of developing skin cancer, including melanoma. *Br J Dermatol* 2013; 168: 162–71.